APPLICATION INSTRUCTIONS
County of Hawai'i
Nonprofit Grants Program

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* NOTICE! *
You are strongly advised to carefully review the Application Submittal Checklist for FY 2023-24 and the Application itself. It is your responsibility to be in full compliance. Failure to do so may result in the disqualification of your application and/or in penalties applied to you which may require your organization to return funds awarded and be ineligible for future County grant awards.

Policies

1. Only one (1) application will be accepted per Project. However, A nonprofit organization acting as a fiscal sponsor may submit applications for multiple Projects.

2. Nonprofit organizations administering multiple Projects must submit a separate grant application for each individual Project. Service descriptions and budget tables must reflect the full scope of each Project's operations.

General Requirements

1. A link for the application, the submittal checklist and instructions can be found on the Kīauea Disaster Recovery website. The application and all documents may be submitted electronically; digital signatures are acceptable on the application form and required attached documents. Only electronic submissions will be accepted.

2. County Code specifies that you must use the application form **provided by the County**.

3. Use spell check, edit/proofread, and recheck the calculations for budget tables. Double check your work before submitting.

4. **The Submittal Checklist must be returned with your application packet.**

5. **Do NOT** enclose or attach any of the following items to the application: Brochures, flyers, photos, letters of support, client testimonies, maps, menus, evaluation tools, graphs/tables/charts, etc..

Application Instructions: (Numbers in this section correspond to the numbers in the Application.)

Enter your nonprofit organization's name (as it appears on your Articles of Incorporation and IRS Form 990. It will auto-populate on all succeeding pages.

Enter the Project Name on the top of the first page of the application. It will auto-populate on all succeeding pages.

Page 1: Enter organization and project names and contact information.

Page 2: Enter the geographical areas to be served, specific properties and specific populations. As appropriate: street address, TMK, subdivision, community, town, etc.

1. Project Resilience Capacity Area
    a. Select only one Resilience Capacity Area. If your project spans more than one, select the Resilience Capacity Area that covers the majority of your project.
2. Eligibility Criteria, provide description or evidence for how the project is consistent with Chapter 2, Article 47 of the Hawai'i County Code 1983 (2016 Edition, as amended). *"Evidence that the nonprofit was directly impacted by the 2018 lower east rift zone eruption of Kīlauea or service to Lower Puna communities, which is defined as extending from and inclusive of the Hawaiian Paradise Park subdivision to Kalapana and including Orchidland Estates, 'Äinaloa, Hawaiian Beaches, Hawaiian Shores, Kapoho, Pähoa, Nänäwale, Leilani Estates, and other communities proximate to the lower east rift zone."*
3. Has this organization received Hawai'i Grants in the past few years:
    a. Report previous year(s) nonprofit grant award(s) received.
4. Nonprofit organization Mission Statement
    a. A brief narrative describing your Agency's mission.

Page 3:
5. Project Description
    a. Briefly describe the project for which you are seeking funds. Will you be working with other organizations, using additional funding, etc.?
6. Total Project Budget
    a. Total project budget applies to the project seeking County grant funding
    b. Total number of people who will be served by the project
    c. Total nonprofit organization budget applies to the entire nonprofit organization
    d. Total number of people served by the nonprofit organization

7. Project Funding Sources
    a. List all sources of funds that you anticipate will fund your project budget, including state and/or federal grants, other specific grants, fundraising events, member contributions, in-kind donations, etc.

Page 4:

8. Project Goals
    a. Describe your finished project, what will you accomplish, who will be served.
9. Project Scope:
    a. Describe what you expect to achieve with the Kīlauea Recovery Grant Funding. What partnerships with other organizations and how do you intend to sustain your accomplishments?

Page 5:

10. Project Expenditures (Budget)
    a. Column One: List the categories of work to be performed, equipment to be purchased, consultants, permitting, etc.
    b. Column Two: Enter the total expense for each budget category, including all revenue sources.
    c. Column Three: Enter the amounts to be funded by other funding sources.
    d. Column Four: Enter the total amount of the expense proposed to be funded by the Kīlauea Recovery Grant. (This should be the amount in column 2 minus column 3.)
    e. If agency costs are attributable to more than one project, please estimate the amount allocated to the project for which you are seeking funds. For example, if personnel (salary and benefits) employed by your organization for this project are also working for your organization in another capacity, report only the portion allocated to the project for whcih you are seeking funds.
    f. In crafting your budget consider that the costs of labor and materials may increase during the period of your project.
    g. Include the cost to administrer your grant and project accounts and reports. If you are working with a fiscal sponsor, you may include in your budget the 10% administrative fee they are permitted to charge.
11. Flexible Budget Measures
    a. Can you proceed if your grant is less than requested? If you do not receive a grant for the full amount requested, would you be able to scale your project to be effective with less funding? What options would you consider?

Page 6:

12. Complete the Organization Conflict Disclosure Form.
    a. The "Name" and "Position" section at top refers to the organization's member who may have a conflict of interest. Leave blank if no member of organization has a potential conflict of interest.
    b. If you are a nonprofit organization acting as a fiscal sponsor for a project entity, please have the Project Manager complete the Conflict Disclosure Form, if appropriate.
    c. Signature of Authorized member of organization or entity is required, may be signed digitally.
13. Certification of Understanding.
    a. Signature and title of nonprofit organization authorized official.
    b. Date field has a drop down calendar

Read carefully before entering the digital signature of the authorized member of the organization. After the signature is entered, you may not be able to alter the document.

How to submit your application

All applications and supporting documents must be submitted by email. No hard copies will be accepted.

Please save a copy of your Application and Submittal Checklist. These and scanned copies of your supporting documents are to be emailed to:

patti.pinto@hawaiicounty.gov

The application deadline is 4:30 pm, October 27, 2023.